

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION		48	2/1/01
O.I.P.E. CLASSIFIER	Rm		
FORMALITY REVIEW	FST		02-20-01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ .....	Rejected	N .....	Non-elected
= .....	Allowed	I .....	Interference
- (Through numeral)...	Canceled	A .....	Appeal
÷ .....	Restricted	O .....	Objected

Claim	Date
Final	02/01/01 C2
Original	02/03/01
1	02/03/01
2	02/03/01
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4	02/03/01
5	02/03/01
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

Best Available Copy